

**One Care Implementation Council Meeting**

**October 25, 2013 11 AM – 1 PM**

**One Ashburton Place, 21<sup>st</sup> Floor**

**Boston, MA**

**Council Members Present:** Suzann Bedrosian (by phone), Bruce Bird, Theodore Chelmow, Anne Fracht, Dennis Heaphy (Chair), Jeff Keilson, David Matteodo, Dale Mitchell, Jorge Pagan-Ramos (by phone), Olivia Richard, Bob Rousseau, Howard Trachtman (Co-Chair), Florette Willis (Co-Chair)

**Council Members Absent:** Myiesha Demery, Joe Finn, Audrey Higbee, Denise Karuth, Dan McHale, Rebecca Gutman, Vivian Nunez, Peter Tallas,

**Handouts:** Agenda, Meeting Minutes (9/20/13), Approved Motions Summary Document, MassHealth Update Presentation, MassHealth letter, Quality Measures document. Documents will be available online at [www.mass.gov/masshealth/onecare](http://www.mass.gov/masshealth/onecare).

**Next Open Council Meeting:** Friday, November 15, 2013 1:00-3:00pm  
1 Ashburton Place, 21st Floor  
Boston, MA

## **1) Approval of Meeting Minutes**

A motion was made to approve the Implementation Council meeting minutes from the 9-20-13 Council meeting.

The motion was seconded.

Ayes: 10

Nahs: 0

Abstentions: 0

The motion carried.

## **2) One Care Updates**

Robin Callahan, Deputy Medicaid Director, presented on One Care enrollment to date and the first phase of auto-assignment with enrollment effective January 1, 2014.

- The first day of effective enrollment was October 1, 2013.
  - Enrollment as of October 1: 1,783
  - Opt-outs as of October 1: 4,261
  - Enrollment as of October 15: 2,827
- Approximately 5.2% of the total One Care eligible population, who were mailed enrollment packets, chose to opt-out of the program.
- It was noted that if an individual opts out, then they will not be included in any auto-assignment phase. They can still opt-in to the program at any time.
- A Council member asked if it was known how many individuals had been assigned LTS Coordinators.
  - Since plans have 90 days to complete the enrollment process, data is not yet available on the number of enrollees in a certain category who have been assigned an LTC Coordinator.
  - It was also noted that plans have reported changing some enrollees rating category to more high need categories based on initial assessment results.

- A question was asked in regards to whether the mailings are reaching eligible individuals.
  - MassHealth noted that mailing addresses were verified by the US Postal Service prior to mailing to reduce the likelihood of mailing to invalid and incorrect mailing addresses.
  - It was also noted that MassHealth will try and gain a better understanding of how and if mailings were received through surveys as part of the early indicators project.

#### *Auto-Assignment*

- The first effective date for the initial phase of auto-assignment will be January 1, 2014.
  - Two additional phases of auto-assignment have been tentatively planned with April 1 and July 1 2014 effective dates.
- The first of two auto-assignment letters will be sent to about 7,000 eligible individuals and will be mailed on or around November 22<sup>nd</sup>.
  - All individuals included in the first round of auto-assignment will be from rating category C1.
- A question was asked as to whether **all** individuals who are initially categorized as rating category C1 would be included in the first phase of auto-assignment.
  - No, only a subset of individuals in C1 will be auto-assigned.
- A question was asked as to whether enrollees would be evenly split across the number of plans available in their county during auto-assignment.
  - No, MassHealth will take into consideration plan capacity and data on eligible individuals' primary care provider practices when matching individuals to One Care plans during auto-assignment.
- A question was asked as to how MassHealth plans to organize the next phases of auto-assignment and whether 7,000 enrollees would be included during each phase of auto-assignment.
  - MassHealth noted that the next phases of auto-assignment will also be based on plan capacity and their enrollment experience to date.

- A Council member asked when MassHealth anticipates planning for the next phase of auto-assignment that may include individuals with high behavioral health needs so that the Council may be involved in the planning process.
  - MassHealth anticipates that they will begin planning the next phase of auto-assignment in December 2013 for an effective date of April 1, 2014.
- A Council member noted that it should be ensured that all One Care enrollment and marketing material is properly translated. An example was provided that the term “auto-assignment” could be mistakenly translated into a Spanish phrase that means self-assignment, the opposite message MassHealth seeks to convey.
  - *This issue has since been looked into and it has been verified that the Spanish language versions of MassHealth One Care material do not use the term “auto-assignment” and instead use different phrasing.*
- A question was asked in regards to whether plans are experiencing members dropping to lower rating categories following the completion of comprehensive assessment.
  - MassHealth noted that a lowering of rating categories has not been noted so far.

### 3) Enrollment Feedback

Florette Willis, Implementation Council Co-Chair, presented on enrollment feedback received from stakeholders to date. Feedback was received via an informal survey conducted by a Disability Advocates Advancing Our Health Care Rights (DAAHR) survey and calls received by the Disability Policy Consortium (DPC) office.

- It was noted that many individuals are choosing to opt-out of One Care and this may be due in large part to misinformation.
  - It was noted that DAAHR directs individuals to sources of more information on One Care such as Health Fairs, MassHealth Customer Service and SHINE.
- It was noted that some individuals have provided feedback regarding MassHealth Customer Service and SHINE being unable to provide enough information or promising to get back to individuals and not following up.
- Cindy Philips, Director of the Massachusetts SHINE Program, provided an update on the types of feedback and questions SHINE Counselors are receiving.

- It was noted that since One Care enrollment is coinciding with Medicare open enrollment, SHINE Counselors are finding it easier to meet with individuals over the phone in order to answer their questions and provide assistance in a timely manner.
- Most SHINE counselor work with enrollees has been with enrollees who live in counties with more than one plan option.
- Enrollees have expressed frustration with not finding a plan with relationships with all their existing providers. Many have chosen to opt out as a result of this issue.
  - It was noted that SHINE staff encourage potential enrollees to contract One Care plans to request that they contract with their existing providers.
- The Implementation Council requested a future formal presentation from the SHINE program. SHINE data will be reported regularly as part of the early indicators project.

#### **4) Early Indicators**

Olivia Richard provided an updated on the Early Indicators Project.

- The early indicators project will include the collection of data from various data sources into a dashboard for regular reporting.
  - Example sources include SHINE and MassHealth Customer Service.
  - The first dashboard may be available as early as next month, with the goal of on-going, monthly reporting.
- Focus groups will be conducted with various target groups including individuals who chose to opt-out of the program, individuals who chose to opt-in to the program, individuals with intellectual disabilities, and individuals who experience auto-assignment to a plan.
- A Council member asked if any focus groups were planned with a focus on providers.
  - It was noted that while providers will likely be a source of information on the program in the future, the initial focus of the early indicators project is members and their initial experience with the program.

## 5) Outreach Updates and Discussion on Strategy

- Council members discussed the need for a strategy to reach out to providers.
  - It was noted that members of the Council are hearing that many providers are confused about One Care and how to engage with or prepare for the program.
- MassHealth noted that several materials have been developed, or are under development, with the goal of providing the provider community with more information on One Care.
  - A provider bulletin and a transmittal letter were distributed and are available online.
  - A provider guide is currently under development and includes suggestions and feedback from provider community representatives.
  - On October 23<sup>rd</sup>, an in-person shared learning conference was held for providers and plans. While many behavioral health and LTSS providers attended, the opportunity was not well attended by primary care providers and other clinicians.
- It was noted that the plans' experience to date is that community-based organizations seem to be more aware of and engaged with One Care. However, plans have experienced difficulty contracting with primary care providers.
  - It was noted that this may be in part due to the way medical providers communicate with their staff, especially front line workers.
  - It was suggested that medical and primary care providers may be better reached through organizational leadership, health care systems, and trade associations. Example: The Massachusetts Medical Society.
- It was noted that it may be more useful to focus on larger health systems than to target individual providers.
- A stakeholder noted a strategy used by another state program included reaching out to primary care providers by distributing informational letters for primary care providers to the consumer community to share with their provider. The document could include general program information and instructions on how to sign up with a One Care plan in order to continue working with the enrollee.
- A comment was made that many individuals with disabilities may not be happy with their primary care provider and may be enthusiastic about having access to a network of

providers through One Care who are committed to supporting individuals with disabilities.

- Enrollees may also not have primary care providers and may rely more on their specialists.
- A Council member noted a recent experience meeting with members of the Chinese community who had not yet heard of One Care. The community members seemed interested in learning more about the program and potentially being ambassadors who could help share information on One Care with members of their community.
- The Council agreed to form a small group of Council members to work closely with MassHealth staff to assist in coming up with a provider outreach strategy.
  - Dale, Bruce, Bob, Jeff, David, and Dennis volunteered.

#### **6) MassHealth Response to Council Letter**

Due to time constraints this agenda item was postponed until the next Council meeting.

#### **Next Implementation Council Meetings**

Friday, November 15, 2013 1:00-3:00pm

1 Ashburton Place, 21st Floor

Boston, MA

Friday, December 20, 2013 1:00-3:00pm

State Transportation Building, Conference Room 1-3

10 Park Plaza

Boston, MA